

MINNESOTA BOARD OF BEHAVIORAL HEALTH AND THERAPY

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Minnesota Relay Service:
1-800-627-3529

INDIVIDUAL LICENSEE'S APPLICATION REQUESTING APPROVAL OF LPC CONTINUING EDUCATION ACTIVITIES

INSTRUCTIONS

- Please fill out this form completely. Incomplete applications will delay processing of your application for approval of continuing education activities.
- You must submit a completed application at least 60 days prior to the start date of the continuing education activity to guarantee a decision prior to the start date. If your application is received within 60 days, it will still be considered for approval, but approval may not be granted until after the activity has been held.
- Approval of continuing education activities is made in accordance with Minn. R. 2150.2540 and 2150.2560.

Required Information

1. Your Name: _____
2. License Number: _____
3. Address: _____
4. Telephone Number: _____
E-mail Address (optional): _____
5. Title of Activity: _____
6. Date(s) of Activity: _____
7. Number of continuing education hours sought: _____

8. Name and address of the organization sponsoring the activity:

9. Detailed description of the content of the activity (a copy of any proposed advertisement, brochure, or other promotional literature may be attached in lieu of a written description if it describes the activity in sufficient detail) (*attach additional sheets if necessary*):

[illegible]

10. Name of each Instructor or Presenter (Please include credentials. *Attach additional sheets if necessary*)

[illegible]

11. Location at which the activity will be conducted, including the name and address of the facility at which the activity will be conducted:

FOR BOARD USE ONLY

1. Date Received: _____
2. Date Reviewed: _____
3. Approved _____ Yes _____ No
4. Hours approved: _____
5. Date notified: _____
6. Log number: _____